

M16 00000 8200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

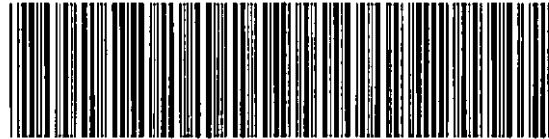
(Business Entity Name)

(Document Number)

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OCT 27 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Elite Events and Tickets, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin McKerley  
Name of Person

Elite Events and Tickets, LLC  
Firm/Company

3112 Washington Rd. Ste B  
Address

Augusta, GA 30907  
City/State and Zip Code

Kevin@eliteeventsusa.com  
E-mail address: (to be used for future annual report notification)

or further information concerning this matter, please call:

Kevin McKerley at ( 706 ) 825-3364  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

ursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company: Elite Events and Tickets, LLC

(a) 3112 Washington Rd Ste B (b) 3112 Washington Rd Ste B  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Augusta, GA 30907

Augusta, GA 30907

10/14/16  
Date of filing/registration in Florida

4.

M16000008200  
Document number

(a) Kevin McKerley  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

200 Ponte Vedra Blvd

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ponte Vedra Beach, FL 32082

FL

(b) Hilary Schwarzmüller  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5323 Bowman Drive

**NEW** Registered Office Address:

Winter Garden, FL 34787

(414) 491-3441

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Kevin McKerley  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Hilary Schwarzmüller  
Signature of Registered Agent